<b>1</b>			
STATE OF ALABAMA, DEPT. OF INDUS		<b>NEW HIRE REPORTING</b>	
EMPLOYER FEIN 636000619 0391	1 EMPLOYER NAME	ADMIN OFFICE OF COURT	S
MARK ONE OF THE FOLLOWING BOXES: New H		Mark to a 19 a dee	NOT like this
SOCIAL SECURITY NUMBER	FIRST DAY OF W (OR DATE OF REFU		ENTATIVE PHONE NUMBER
E	MM DD	YYYY (III)	-
LAST NAME		FIRST NAME	MI
1			
STREET NUMBER STREET	NAME OR RURAL ROUTE A	<i>ND</i> NUMBER	P.O. BOX NUMBER
2		c	OR
CITY		STATE ZIP CODE	_
3			]
THE ABOVE INFORMATION IS TRUE AND	CORRECT		
		EMPLOYER	
EMPLOYEE Signature	Date	Representative Signature	Date
PLEASE MAKE YOUR CHARACTERS LIKE T	HE SAMPLES BELOW:		<del></del>
ABCDEFGHIJKL	MNOPQRST	UVWXYZ 1234	567890
		SECTION E — Employer should enter number, first day of work, and whether (Job-refusal reports should be completed employer, including phone number.)	new hire, recall or refusal.
		SECTIONS 1, 2, and 3 - May be or employee. Enter employee informat form as shown by the example.	completed by the employer ion indicated on the report
		The form must be signed by the employer (or representative) except fo only the employer's signature.	

COMPLETE ONE FORM PER INDIVIDUAL, PRINT IN UPPER CASE LETTERS, WRITE WITHIN THE BOXES, AND USE ONLY BLACK OR BLUE INK.

Employers are required to furnish new hire and/or recall information to the Alabama Department of Industrial Relations, beginning October 1, 1997, within seven (7) days of the first day of work, per Act 97-228, New Hire Act of 1997. This information will be entered into the Alabama Directory of New Hires to help prevent program abuse and to assist the Federal Parent Locator Service, as required by Public Law 104-193. A penalty of up to \$25 may be assessed per failure to report New Hire data. New Hire data should be **MAILED TO:** 

Alabama Department of Industrial Relations New Hire Unit 649 Monroe Street, Room 283 Montgomery, AL 36131-0283

(This form is designed to fit a standard No. 10 windowed envelope.)